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DATE: March 12, 2004

TO:

NAME	FAX NO.	PHONE NO.
US Patent and Trademark Office	(703) 872-9306	

FROM: Einar Stole **PHONE:** (202) 835-7553

RE: US Patent Application Serial No. 10/720,091

FILE NUMBER: 17357.01202US		
NUMBER OF PAGES, INCLUDING COVER:	9	ORIGINALS FOLLOW BY MAIL: NO

MESSAGE:

Please see attached.

Regards,
 Einar Stole

CONFIDENTIALITY NOTE:

PTO/SB/21 (08-03)

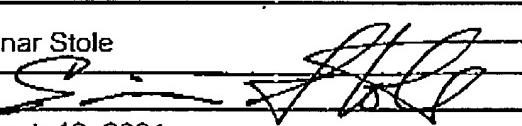
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TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number 10/720,091
		Filing Date November 25, 20003
		First Named Inventor Cavallaro
		Art Unit N/A
		Examiner Name N/A
Total Number of Pages In This Submission		Attorney Docket Number 17357.01202US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> 1. Power of Attorney and Correspondence Address Indication Form 2. Statement Under 37 CFR 3.73(b) 3. Assignments with Recordation Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Einar Stole	
Signature		
Date	March 12, 2004	

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Application Number	10/720,091
Filing Date	November 25, 2003
First Named Inventor	Cavallaro
Title	Use of FGF-18...
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	17357.01202US

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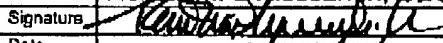
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 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Name: Robert M. D'Alessandro, CEO Executive Director

Signature: 

Date: 1/23/04 Telephone: (304) 293-4511

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

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